

MENTAL & EMOTIONAL HEALTH & WELL-BEING

INDICATOR #26 Considered Suicide

INDICATOR #27 Suicide Rate

DEFINITIONS

INDICATOR #26A — Percentage of BC students in grades 7–12 who report having seriously considered suicide in the past year.

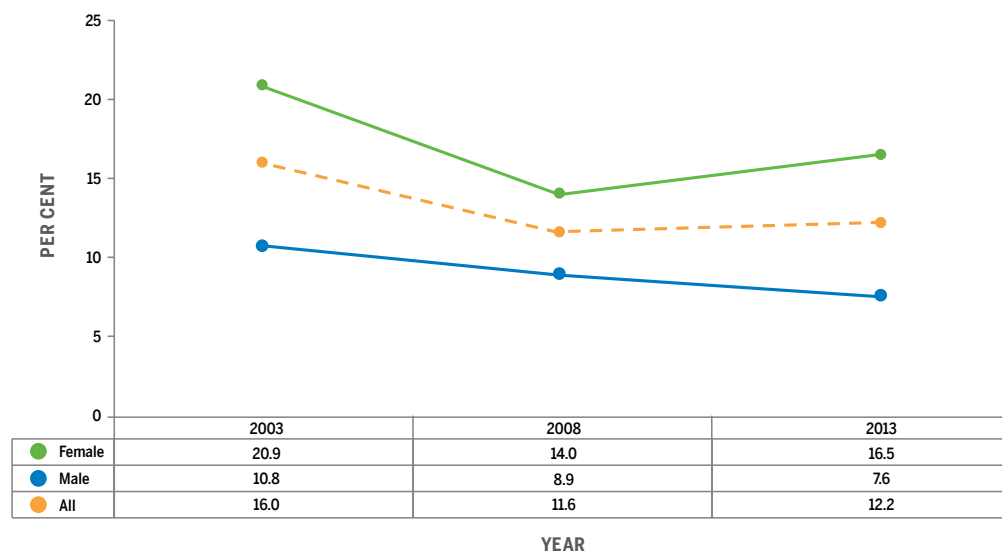
INDICATOR #26B — Percentage of BC students in grades 7–12 who report having attempted suicide in the past year.

INDICATOR #27 — Suicide rate of children and youth age 10–18, per 100,000 population.

KEY MESSAGES

- ▶ **Suicidality** in young people encompasses a range of behaviours, including thinking about suicide (suicidal ideation), deliberate self-harm, suicide attempts, and completed suicide.¹
- ▶ In the US, suicide is the third leading cause of mortality among children and youth age 10–24, and according to a 1991 estimate, as many as 3 per cent of youth make suicide attempts serious enough to require medical treatment.² As such, suicidality among youth is a serious concern.
- ▶ The reviews of evidence regarding youth suicidality highlight the importance of knowing and understanding key risk factors in order to identify opportunities for early identification and to facilitate intervention.¹
- ▶ A range of studies have examined the life course of adolescents who have attempted and completed suicide, and have identified risk factors associated with suicidal behaviour. These risk factors include depression, disruptive behaviour disorders, abuse during childhood, poor relationships with parents, firearm availability, stressful life events, and substance use disorders—with comorbid psychiatric conditions further increasing risk. Individuals with family histories of suicidality may also be at greater risk of suicide.¹
- ▶ Evidence shows that specific groups of youth are at a greater risk of suicidality, including gay, lesbian, and bisexual youth; youth in the criminal justice system; and homeless/runaway youth.¹
- ▶ Engaging in self-harm at a young age has been identified as an important indicator of mental health problems later in life, and has been linked to a strongly increased risk of subsequent suicidal behaviour.¹ In fact, one of the best predictors of future attempts and completed suicide is having attempted suicide in the past.²
- ▶ Data currently available enables analyses of BC youth in grades 7–12 who have considered and/or attempted suicide, and those age 15–19 who have completed suicide. Future analyses may be able to report on youth age 10–18.
- ▶ As shown in Figures 26A.1 and 26B.1, female youth in grades 7–12 are more likely to consider and/or attempt suicide than male youth; however, Figure 27.1 shows that male youth age 15–19 have a higher suicide mortality rate per 100,000 population.
- ▶ Figures 26A.2 and 26B.2 demonstrate that the percentages of youth in grades 7–12 who have considered or attempted suicide are higher in Northern Health than Vancouver Coastal Health.

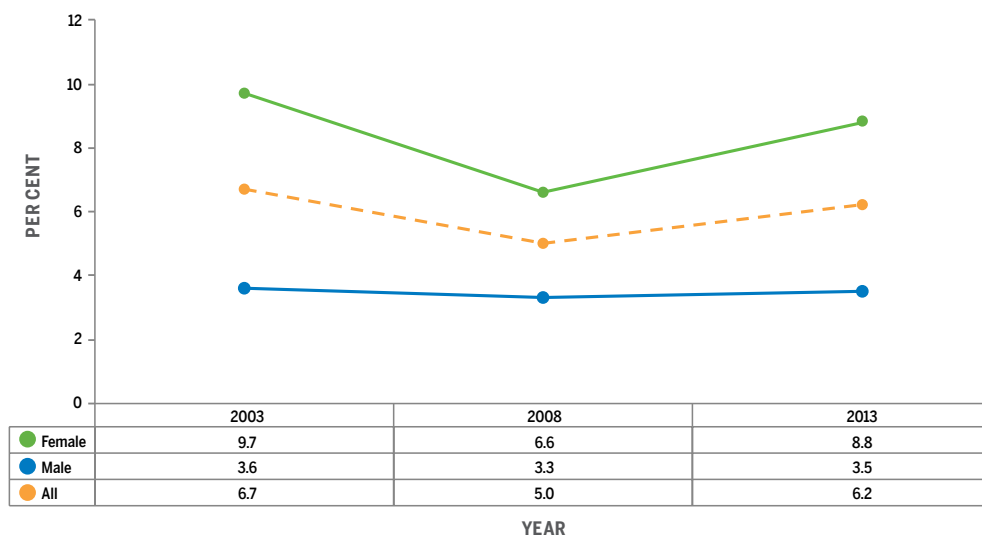
FIG 26A.1 Percentage of Students in Grades 7-12 Who Seriously Considered Suicide in the Past 12 Months, by Sex, BC, 2003, 2008, and 2013



Notes: The differences between years were statistically significant for females and males. The difference between sexes was statistically significant for all years. See Appendix B for more information about this data source.

Source: McCreary Centre Society, BC Adolescent Health Survey, 2003, 2008, 2013. Prepared by the Surveillance and Epidemiology Team, BC Office of the Provincial Health Officer, 2016.

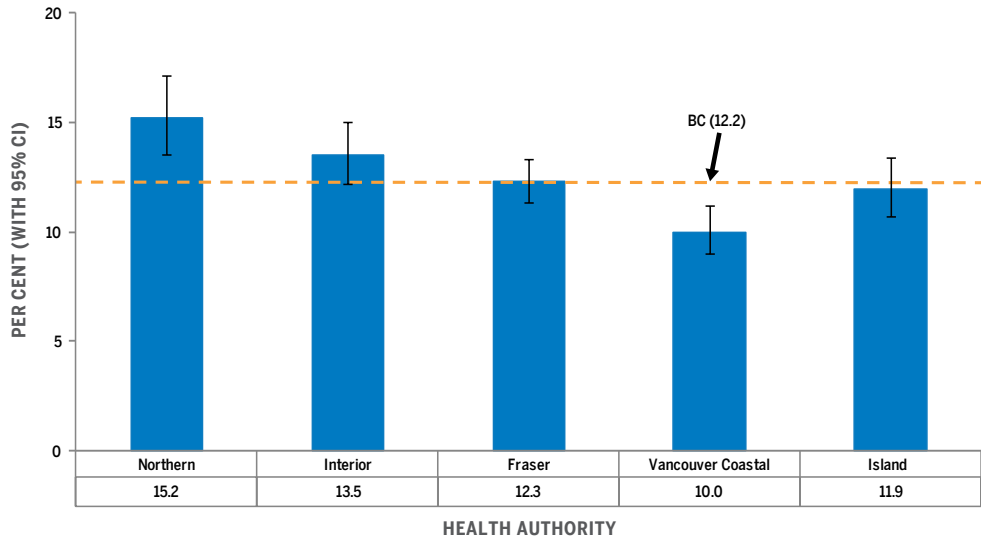
FIG 26B.1 Percentage of Students in Grades 7-12 Who Attempted Suicide in the Past 12 Months, by Sex, BC, 2003, 2008, and 2013



Notes: The differences between 2003 and 2008 and between 2008 and 2013 were statistically significant for "All". The differences between years were statistically significant for females but not for males. See Appendix B for more information about this data source.

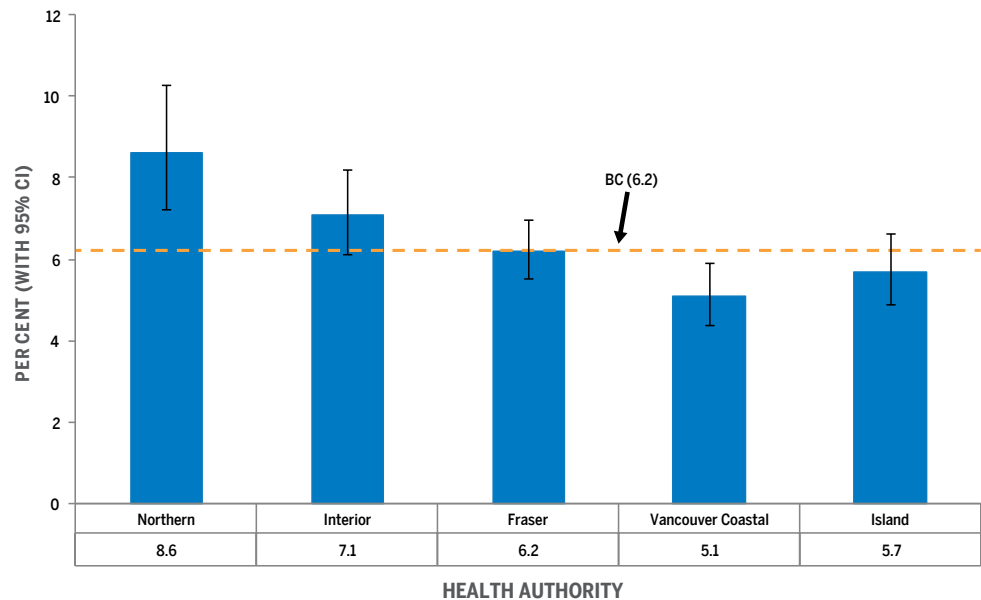
Source: McCreary Centre Society, BC Adolescent Health Survey, 2003, 2008, 2013. Prepared by the Surveillance and Epidemiology Team, BC Office of the Provincial Health Officer, 2016.

FIG 26A.2 Percentage of Students in Grades 7-12 Who Seriously Considered Suicide in the Past 12 Months, by Health Authority, BC, 2013



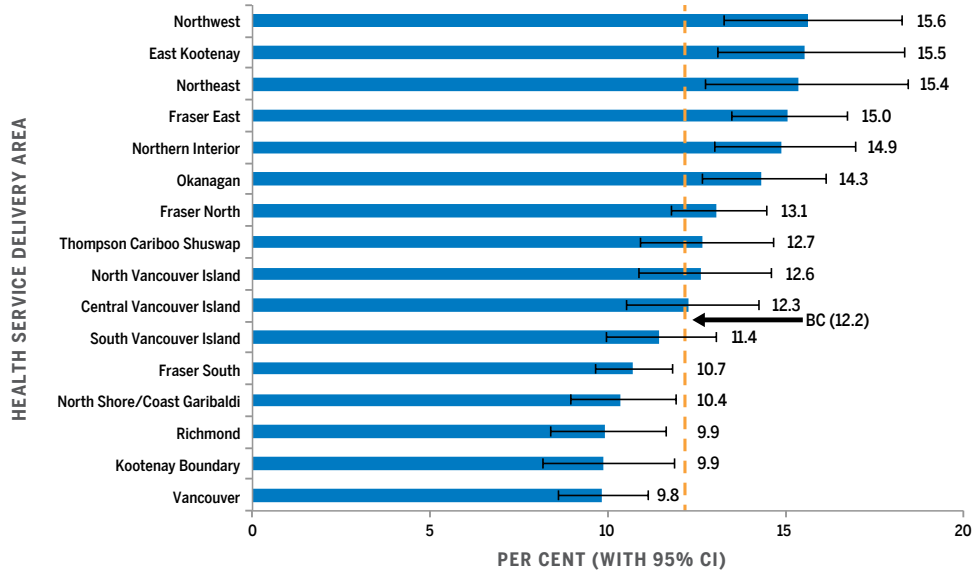
Notes: Health authority is based on the location of the school. See Appendix B for more information about this data source.
Source: McCreary Centre Society, BC Adolescent Health Survey, 2013. Prepared by the Surveillance and Epidemiology Team, BC Office of the Provincial Health Officer, 2016.

FIG 26B.2 Percentage of Students in Grades 7-12 Who Attempted Suicide in the Past 12 Months, by Health Authority, BC, 2013



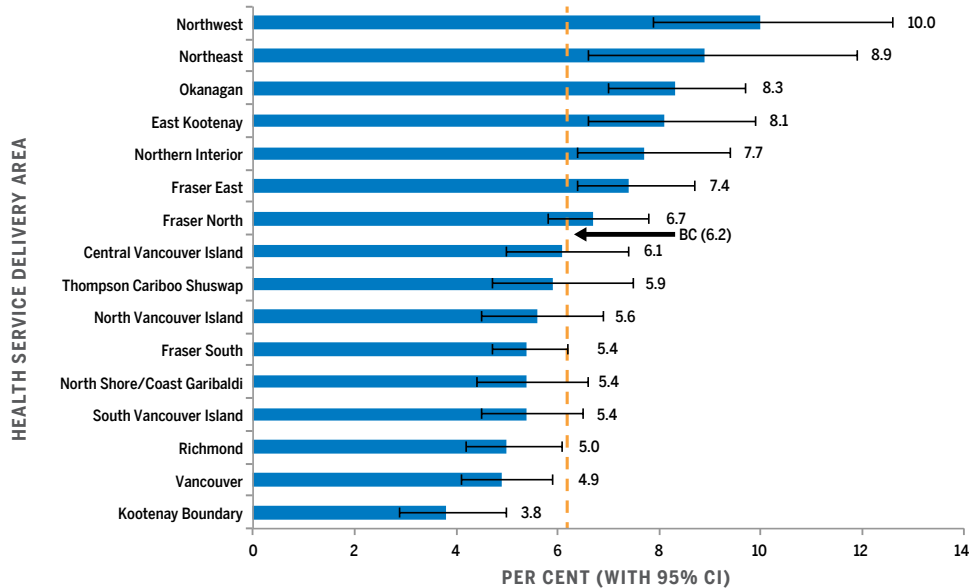
Notes: Health authority is based on the location of the school. See Appendix B for more information about this data source.
Source: McCreary Centre Society, BC Adolescent Health Survey, 2013. Prepared by the Surveillance and Epidemiology Team, BC Office of the Provincial Health Officer, 2016.

FIG 26A.3 Percentage of Students in Grades 7-12 Who Seriously Considered Suicide in the Past 12 Months, by Health Service Delivery Area, BC, 2013



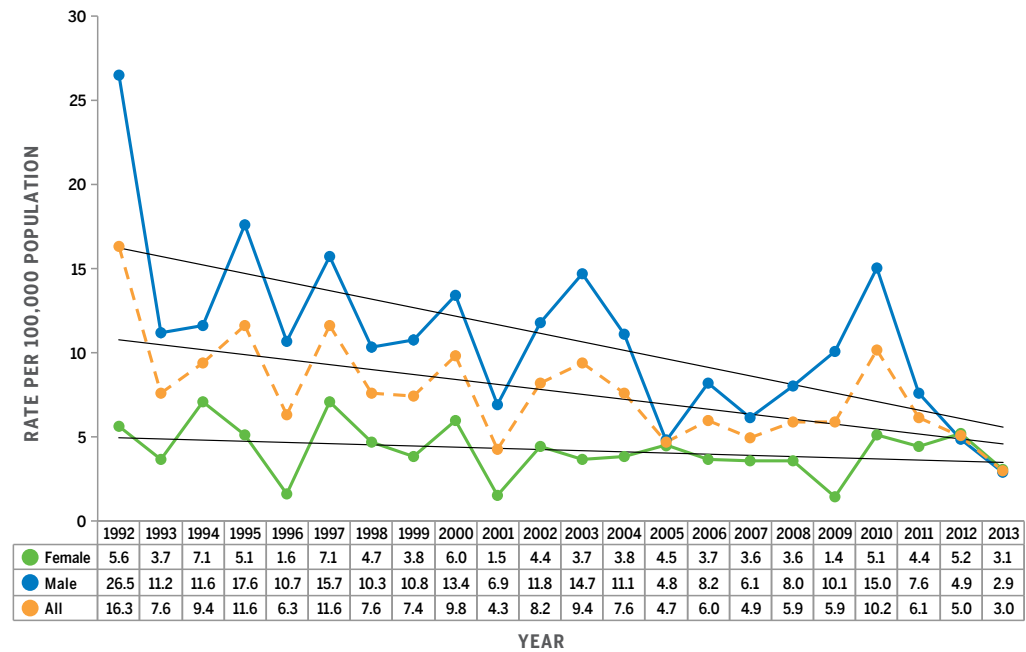
Notes: Health service delivery area is based on the location of the school. See Appendix B for more information about this data source.
Source: McCreary Centre Society, BC Adolescent Health Survey, 2013. Prepared by the Surveillance and Epidemiology Team, BC Office of the Provincial Health Officer, 2016.

FIG 26B.3 Percentage of Students in Grades 7-12 Who Attempted Suicide in the Past 12 Months, by Health Service Delivery Area, BC, 2013



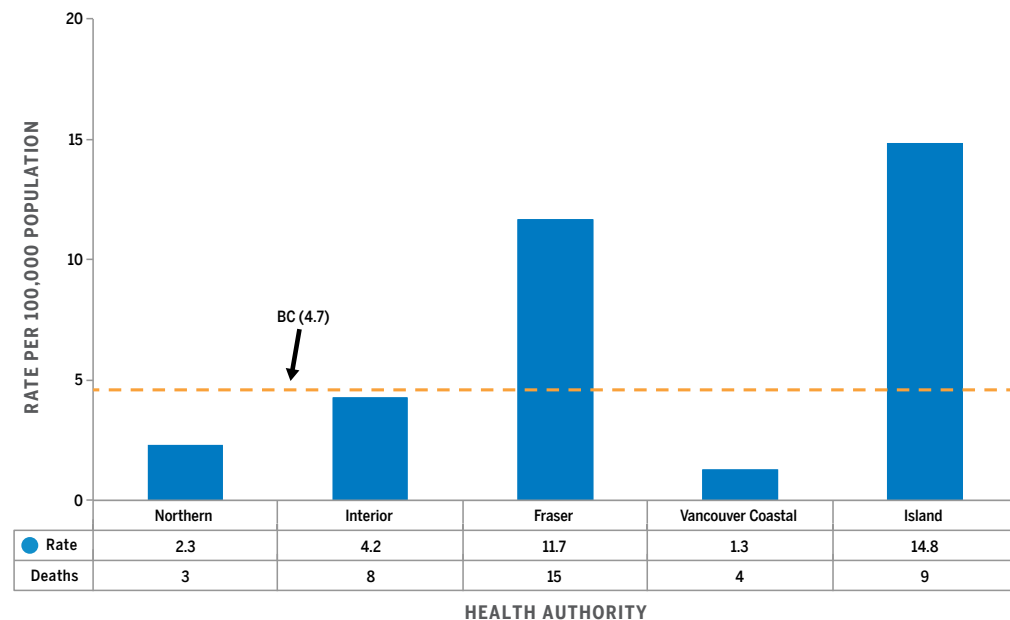
Notes: Health service delivery area is based on the location of the school. See Appendix B for more information about this data source.
Source: McCreary Centre Society, BC Adolescent Health Survey, 2013. Prepared by the Surveillance and Epidemiology Team, BC Office of the Provincial Health Officer, 2016.

FIG 27.1 Suicide Mortality among Youth Age 15-19, Rate per 100,000 Population, by Sex, BC, 1992 to 2013



Notes: Health authority is based on the usual residence of the youth. See Appendix B for more information about these data sources.
Sources: BC Vital Statistics Agency, 1992-2013 data. Population estimates are from the BC Stats website. Prepared by the Surveillance and Epidemiology Team, BC Office of the Provincial Health Officer, 2016.

FIG 27.2 Suicide Mortality among Youth Age 15-19, Rate per 100,000 Population, by Health Authority, BC, 2011-13



Notes: Health authority is based on the usual residence of the youth. See Appendix B for more information about these data sources.
Sources: BC Vital Statistics Agency, 2011-13 data. Population estimates are from the BC Stats website. Prepared by the Surveillance and Epidemiology Team, BC Office of the Provincial Health Officer, 2016.

REFERENCES

¹Somers JM, Currie L, Eiboff F. Child and youth health and well-being indicators project: appendix G – mental and emotional health and well-being evidence review [prepared for the Office of the Provincial Health Officer and the Canadian Institute for Health Information]. Ottawa, ON: Canadian Institute for Health Information; 2011.

²Spirito A, Esposito-Smythers C. Attempted and completed suicide in adolescence. *Annu Rev Clin Psychol.* 2006;2:237-66.